

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213549449				
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME: BUCKHORN HUNTING CLUB, INC.</p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: JON STEVEN COUCH 3816 PALMWOOD DRIVE P.O. BOX 3078 WISE, VA</p> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE: WISE COUNTY</p> <p>4.) STATE OR COUNTRY OF INCORPORATION: VA</p> </div> <div style="width: 35%;"> <p>DUE DATE: 8/31/2013</p> <p>SCC ID NO: 03626835</p> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>5,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	5,000
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COMMON	5,000					
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 3816 PALMWOOD DRIVE PO BOX 3078</p> <p style="text-align: center;">CITY/ST/ZIP: WISE, VA 24293</p>						
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>						
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JON STEVEN COUCH TITLE: PRESIDENT ADDRESS: 3816 PALMWOOD DRIVE PO BOX 3078 CITY/ST/ZIP/CO: WISE, VA 24293 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 40%; text-align: center; vertical-align: middle;"> OFFICER <input checked="" type="checkbox"/> DIRECTOR </td> </tr> </table>			NAME: JON STEVEN COUCH TITLE: PRESIDENT ADDRESS: 3816 PALMWOOD DRIVE PO BOX 3078 CITY/ST/ZIP/CO: WISE, VA 24293	<input checked="" type="checkbox"/>	OFFICER <input checked="" type="checkbox"/> DIRECTOR	
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NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Ronald Freeman DIRECTOR P.O. Box 33 Wise, VA 24293	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	R Micheal Moore DIRECTOR P.O. Box 3217 Wise, VA 24293	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Barry Allison DIRECTOR P.O. Box 2943 Wise, VA 24293	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Baxter McElroy DIRECTOR 10547 Serenbe Lane Palmetto, GA 30268	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Kathleen Bays DIRECTOR P.O. Box 475 Wise, VA 24293	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	Larry Stallard DIRECTOR 10601 Lake Ridge Road Wise, VA 24293	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ JON STEVEN COUCH SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JON STEVEN COUCH, PRESIDENT PRINTED NAME AND CORPORATE TITLE	10/24/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			